



STATE OF TENNESSEE  
DEPARTMENT OF FINANCE AND ADMINISTRATION  
**BUREAU OF TENNCARE**  
310 GREAT CIRCLE ROAD  
NASHVILLE, TENNESSEE 37243 - 1700

## **MCC CHECKLIST**

### **Instate and Out-Of-State Individual Provider In Private Practice or Provider Joining A Group**

This check list will assist you in completing and returning the correct forms along with this document.  
Enrollment Packets must include the following:

**NPI Number**

— — — — —

**NPI Collection Form**

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**No. 2 Individual Application**

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**Provider Participation Agreement**

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**Substitute W-9 Form**

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**Copy Of License**

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**Copy Of License Renewal**

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**Copy of Certification**

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**Copy of Renewal**

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**NOTE : THIS FORM MUST BE RETURNED WITH THE ENROLLMENT PACKET.**